								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD									10/674009					
Effective January 1, 2003											<u> 27</u>	036 .	062	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									EN		OR	OTHER		
TOTAL CLAIMS			28					RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	375.00	OR	Basic fee	750.00	
TOTAL CHARGEABLE CLAIMS			28 - minus 20=		8			X\$ 9= -78-		ΩR	X\$18=			
INDEPENDENT CLAIMS			minus 3 =		· oʻ			×42=		OR	X84=			
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=			OR	+280=		
* If the difference in column 1 is less than zero, enter *0* in column 2								TOTAL CYS		QR	TOTAL			
CLAIMS AS AMENDED - PART II										7 7	۲۳;	OTHER	THAN	
13	(2-26-6 (Column 1) (Column 2): (Column 3)							SMA	LL I	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING		HIGH NUM	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
		AFTER AMENDMENT		PREVIO					_			HAIE	FEE	
	Total	. 28	Minus	- J	8	-		X\$ 9	-/		ÔR	X\$18=	1	
	Independent	•	Minus	***	3	-	-	X42	=		ÓR	X84=	X/	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDEN	CLAIM		j	+140	İ		• (280=		
									YAL	•	OR	TOTAL		
7	1910	1	(Column 2) (Column 3)					ADDIT. FEE OR ADDIT. FEE						
AMENDMENT B		(Column 1) CLAIMS		HIGH	EST		1			ADDI-			ADDI-	
	REMAINING AFTER		PREVIO		DUSLY EXTRA!		١	RATE	TIONAL		RATE	TIONAL		
	Total	AMENDMENT	Minus	PAID) 1	. 1	1	V# 6		FEE		V#10-	FEE/	
	Independent	- 20	Minus		3	- /	-	X\$ 9			OR	X\$18=	-/-	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		1	X42	-		OR	X84=	-/-1	
			+140)=		OR	+280=							
							,	TO ADDIT, I	YAL FEE		OR	TOTAL ADDIT. FEB		
_		(Column 1)		(Colu		(Column 3	4							
AMENDMENT C		REMAINING		NUM	BER'	PRESENT		RAT		ADDI-		DATE	ADDI-	
		AFTER AMENDMENT			OUSLY FOR	EXTRA	1	HAI	_	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus			5		X\$ 8	=		OR	X\$18=		
	Independent	•	Minus	***	T (0) A11	·	4	X42	_		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140		·		+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	TOTAL	 	
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE														
	The *Highest Nun	nber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest numl	ber to	und in th	e ap	propriate bo	x in ca	alumn 1.		